FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1066247						
OMB APPROVAL						
OMB Number:	3235-0076					
Expires: May 31, 2005						
Estimated average burden						
hours per response 16.00						

SEC USE ONLY						
Prefix	Seria					
DATE RE	CEIVED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.) REGENCY CENTERS, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	☐ ULOE RECEIVED
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	130 /5
REGENCY CENTERS, L.P.	179/3/
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
121 West Forsyth Street, Suite 200, Jacksonville, Florida 32202	904.598.7000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PROCECCE
To develop, own and operate grocery anchored shopping centers	POSED
	JUL 20 2001 -
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed	PROCESSED JUL 20 2004 THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	and the second second
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for so ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	securities Administrator in each state where sales rethe exemption, a fee in the proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

A. BASIC IDENTIFICATION DAT	f A
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years	s;
• Each beneficial owner having the power to vote or dispose, or direct the vote or dispositi	ion of, 10% or more of a class of equity securities of the issue
Each executive officer and director of corporate issuers and of corporate general and it.	managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Offic	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Offic	er Director 🗷 General and/or Managing Partner
Full Name (Last name first, if individual)	
Regency Centers Corporation	
Business or Residence Address (Number and Street, City, State, Zip Code) 121 West Forsyth Street, Suite 200, Jacksonville, Florida 32202	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Offic	er 🗷 Director 📋 General and/or Managing Partner
Full Name (Last name first, if individual)	
Stein, Martin E. Jr.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
121 West Forsyth Street, Suite 200, Jacksonville, Florida 32202	
Check Box(es) that Apply: Promoter Beneficial Owner Ex Executive Office	er 🗷 Director 🗌 General and/or Managing Partner
Full Name (Last name first, if individual)	
Fiala, Mary Lou	
Business or Residence Address (Number and Street, City, State, Zip Code)	
121 West Forsyth Street, Suite 200, Jacksonville, Florida 32202	
Check Box(es) that Apply: Promoter Beneficial Owner Ex Executive Offic	er Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Johnson, Bruce M.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
121 West Forsyth Street, Suite 200, Jacksonville, Florida 32202	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Offic	er 🗷 Director 🦳 General and/or Managing Partner
Full Name (Last name first, if individual)	
Bank, Raymond L.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
1903 Western Run Road, Butler, Maryland 21023	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	er 🗷 Director 🗌 General and/or Managing Partner
Full Name (Last name first, if individual)	
Blankenship, C. Ronald	
Business or Residence Address (Number and Street, City, State, Zip Code)	
3756 Knollwood, Houston, Texas 77019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	er 🗷 Director 🗌 General and/or Managing Partner
Full Name (Last name first, if individual)	
Carpenter, A. R.	
Business or Residence Address (Number and Street, City, State, Zip Code)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

500 Water Street, 15th Floor, Jacksonville, Florida 32202

Regency Centers, L.P.

Form D, Part A. 2. continued

Director Druce, J. Dix One Independent Drive, Suite 2201 Jacksonville, Florida 32202

Director Luke, Douglas S. 405 Lexington Avenue, 48th Floor New York, New York 10174

Director Schweitzer, John C. 100 Congress Avenue, Suite 930 Austin, Texas 78701

Director Wattles, Thomas G. 518 17th Street, Suite 1700 Denver, Colorado 80202

Director Worrell, Terry N. 6909 Vassar Dallas, Texas 75205

	në Nati M				B. I	NFORMAT	ION ABOU	T OFFERI	NG				
1	Hon the	deense est	d andaaa ()		-tond to so	11 +2 -2 - 2	aamaditad i	nvestens in	this offeri	n ~?		Yes	No
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									×			
2.									s N/A				
-	What is the minimum investment that will be accepted from any individual?									Yes	No		
3.	Does the offering permit joint ownership of a single unit?							x					
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		Last name	first, if ind	ividual)	-								
$\frac{N}{Bu}$		Residence	Address (N	umber and	1 Street C	ity State 7	(in Code)						
Du.	3111033 01	Residence	71001033 (11	umoer am	a Bireet, C	ity, State, 2	sip code)						
Na	me of As	sociated B	roker or De	aler									
Sta	tes in Wi	nich Persor	1 Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)				•••••	••••••			l States
	AL	[AK]	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT RI	IN NE SC	IA NV SD	KS NH TN	KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	MI OH WV	MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if ind	vidual)									
Bu:	siness or	Residence	e Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Na	me of As	sociated B	roker or De	aler		-			· · · · · · · · · · · · · · · · · · ·				
Sta	tes in Wi	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers	 -	-	 			
	(Check	"All State:	s" or check	individual	States)			***************	***************************************	******************			l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	vidual)									
Bus	siness or	Residence	e Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)									States				
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Aiready
	Type of Security	Offering Price	Sold
	Debt	S	\$
	Equity	S	\$
	Common Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests	13,400,000	\$_13,400,000
	Other (Specify)	S	\$
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	§ 13,400,000
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<u>\$_0</u>
	Printing and Engraving Costs		<u>\$ 0 </u>
	Legal Fees		<u>\$ 0</u>
	Accounting Fees		•
	Engineering Fees		0
	Sales Commissions (specify finders' fees separately)	_	
	Other Expenses (identify)	_	\$ O
	Total		§ 0

All expenses will be paid by the General Partner

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	and total expenses furnished in response to Part C — proceeds to the issuer." Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for an	Enter the difference between the aggregate offering price given in response to Part C — Question 1 total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross ceeds to the issuer." ————————————————————————————————————				
	check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part					
			Payments to Officers, Directors, & Affiliates	Payments to Others		
	Salaries and fees] \$	<u></u> \$		
	Purchase of real estate] \$	\$		
	Purchase, rental or leasing and installation of mac and equipment	chinery	7 ¢	□ ¢		
	Construction or leasing of plant buildings and fac	-	-			
	Acquisition of other businesses (including the val	_	」Ψ			
	offering that may be used in exchange for the asse issuer pursuant to a merger)	1\$	□ \$ 13,400,000			
	Repayment of indebtedness					
	Working capital		="			
	Other (specify):		-			
				_		
] \$	<u></u> \$		
	Column Totals] \$	\$ <u>13,400,000</u>		
	Total Payments Listed (column totals added)					
		D. FEDERAL SIGNATURE				
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accordance.	undersigned duly authorized person. If this notice inish to the U.S. Securities and Exchange Commiss	is filed under Ru ion, upon writte	le 505, the following		
Issu	er (Print or Type)	Storator D	ate			
Re	gency Centers, L.P.	amhteen !	July ?	3,2004		
Nai	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
J. (Christian Leavitt	Senior Vice President of Regency Centers Con	rporation, Gene	ral Partner		
				·		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)